RULE-MAKING ORD		CR-103 (June 2004) (Implements RCW 34.05.360)
Agency: Department of Health - Chiropractic Quality Assu	rance Comm.	Permanent Rule
Effective date of rule:	Bee	Emergency Rule
Permanent Rules		tive date of rule:
31 days after filing.		Emergency Rules mmediately upon filing.
Other (specify) (If less than 31 days after filing specific finding under RCW 34.05.380(3) is required and should be stated	j,a ∐ L ted below\	ater (specify)
Any other findings required by other provisions of law as Yes No If Yes, explain:	s precondition t	adoption or effectiveness of rule?
Purpose: This rule adds text that conveys more accurately students, clinical postgraduate trainees, and auxiliary staff me senior students, and clinical postgraduate trainees to oversee exercises or use of therapeutic or rehabilitation equipment as	ay penonin, and a	lous text that will allow auxiliary staff, regular
Citation of existing rules affected by this order		racio corvides.
nepealed;		
Amended: WAC 246-808-190 and WAC 246-808-535 Suspended:		
OLAL 1		
Other authority: RCW 18.25.0171 Other authority: RCW 18.25.190		
PERMANENT RULE ONLY (Including Expedited Rule Mak Adopted under notice filed as WSR 05-20-102 Describe any changes other than editing from proposed to	• • •	<u>ober 5, 2005</u> (date). : None.
If a preliminary cost-benefit analysis was prepared under I contacting:	RCW 34.05.328,	a final cost-benefit analysis is available by
	(360) 236-4856	
	(360) 336 4046	
0000 1 -7000	(360) <u>236-4918</u>	
 e-mail	karen kelley@c	
	karen.kelley@c	oh.wa.gov for the preservation of the public ments of notice and opportunity to
Under RCW 34.05.350 the agency for good cause finds: That immediate adoption, amendment, or repeal of a health, safety, or general welfare, and that observing comment upon adoption of a permanent rule would be that state or federal law or federal rule or a federal design.	karen.kelley@c	oh.wa.gov for the preservation of the public ments of notice and opportunity to
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(COMPLETE REVERSE SIDE)

TIME_ WSR_

Vice Chair, Chiropractic Quality Assurance Commission

JAN 4 2006

Note: If any category is left blank, it will be calculated as zero. No descriptive text.

Count by whole WAC sections only, from the WAC number through the history note.
A section may be counted in more than one category.

The number of sections adopted in	order to d	omply with:			
Federal statute:	New		Amended		Repealed
Federal rules or standards:	New		Amended		Repealed
Recently enacted state statutes:	New		Amended		Repealed
					•
The number of sections adopted at	the reques	st of a nong	overnmental e	entity:	
	New		Amended	1	Repealed
				_	
•					
he number of sections adopted in t	he agency	y's own initi	ative:		
	New		Amended	2	Repealed
		-		_	
he number of sections adopted in o	order to cla	arify, stream	iline, or reform	n agency	/ procedures:
he number of sections adopted in o	order to cla	arify, stream	i line, or refor Amended	n agency <u>2</u>	/ procedures:
he number of sections adopted in o		arify, stream	•		
he number of sections adopted in o		arify, stream	•		
	New	arify, stream	•		
	New	arify, stream	Amended		Repealed
he number of sections adopted in o he number of sections adopted usir Negotiated rule making: Pilot rule making:	New	arify, stream	•		

AMENDATORY SECTION (Amending WSR 96-16-074, filed 8/6/96, effective 9/6/96)

WAC 246-808-190 Preceptor or direct supervisory doctor. A preceptor is a doctor of chiropractic who is approved by the commission to provide direct supervision to ((an unlicensed chiropractic doctor)), clinical postgraduate trainee, or regular senior student, as set forth in RCW 18.25.190. The commission ((shall)) maintains a list of approved preceptors.

(1) An approved preceptor shall:

(a) Provide direct supervision and control;

(b) Be on the premises any time the ((unlicensed chiropractic doctor)) clinical postgraduate trainee, or regular senior student, treats patients in accordance with WAC 246-808-535; and

(c) Meet with the patient prior to commencement of chiropractic care, and inform the patient in writing of the unlicensed status of the person from whom care is being received.

(2) To apply for commission approval to function as a preceptor, a doctor of chiropractic shall submit to the commission:

(a) Proof of licensure as a Washington chiropractic doctor for the preceding five years, during which time the license has not been suspended, revoked, or otherwise conditioned or restricted;

(b) A completed official application;

- (c) Verification of approval to participate in the program by an approved chiropractic college;
- (d) Evidence of malpractice insurance for the ((unlicensed chiropractic doctor and)) clinical postgraduate trainee, the preceptor applicant, the regular senior student; and

(e) A fee as specified in WAC 246-808-990.

AMENDATORY SECTION (Amending WSR 96-16-074, filed 8/6/96, effective 9/6/96)

WAC 246-808-535 Delegation of services to auxiliary staff, regular senior students, and ((graduate doctors of chiropractic)) clinical postgraduate trainees. (1) A licensed chiropractor may((, within the confines of this section,)) delegate certain services to auxiliary staff, regular senior students, and ((graduate doctors of chiropractic, provided that)) clinical postgraduate trainees, if these services are performed under the licensed chiropractor's direct supervision and control. The supervising chiropractor shall be responsible for determining that auxiliary staff, regular senior students, and ((graduate doctors of chiropractic)) clinical

<u>postgraduate trainees</u> are competent to perform the delegated services. The licensed supervising chiropractor must render adequate supervision so that the patient's health and safety is not at risk.

(2) Auxiliary staff ((and graduate doctors of chiropractic)) shall not perform the following services:

(a) Detection of subluxation;

(b) Adjustment or manipulation of the articulations of the ((spinal column or its immediate articulations)) body;

(c) Interpretation or analysis of radiographs;

(d) Determining the necessity for chiropractic care;

- (e) Orthopedic or neurological examinations ((provided, graduate doctors of chiropractic may perform preliminary orthopedic or neurological examinations under the direct supervision of a licensed chiropractor)).
- (3) Regular senior students may perform the following under the direct supervision and control of an approved preceptor:

(a) Detection of subluxation;

- (b) Expose, interpret or analyze radiographs;
- (c) Determine the necessity for chiropractic care;

(d) Orthopedic or neurological examinations.

(4) Clinical postgraduate trainees may perform the following under the direct supervision and control of an approved preceptor:

(a) Detection of subluxation;

- (b) Adjustment or manipulation of the articulations of the body;
 - (c) Expose, interpret or analyze radiographs;
 - (d) Determine the necessity for chiropractic care;

(e) Orthopedic or neurological examinations.

(5) Auxiliary staff, regular senior students, and ((graduate doctors of chiropractic)) clinical postgraduate trainees may perform the following auxiliary services: Preliminary patient history, height, weight, temperature, blood pressure, pulse rate, ((and)) gross postural observation, ((+)) active spinal range of motion utilizing a generally accepted measuring device((+)), and oversight of patients during approved therapeutic procedures, rehabilitation exercises or use of therapeutic or rehabilitation equipment as incident to chiropractic services.